

COUNTRY PARK VILLAS HOMEOWNERS ASSOCIATION

HOME IMPROVEMENT FORM

Please complete this request form and attaché three (3) copies of the proposed improvement plans and mail or deliver to:

COUNTRY PARK VILLAS HOMEOWNERS ASSOCIATION
c/o Action Property Management, Inc.
3602 Inland Empire Blvd., Suite C-310
Ontario, CA 91764

ARCHITECTURAL REVIEW COMMITTEE

Date: _____

X _____
(Homeowner's Signature)

Name _____

Work Phone _____ Home Phone _____

Address _____, CA

PROJECTS BEING SUBMITTED: (Please check appropriate box)

Approximate Start Date ____ / ____ / ____

Finish Date ____ / ____ / ____

<input type="checkbox"/> AIR CONDITIONER	<input type="checkbox"/> GREEN HOUSE
<input type="checkbox"/> AWNINGS	<input type="checkbox"/> GAZEBO
<input type="checkbox"/> LAWN ONLY	<input type="checkbox"/> TREES
<input type="checkbox"/> DECK	<input type="checkbox"/> LANDSCAPING
<input type="checkbox"/> DRAINS (If altering existing grade)	<input type="checkbox"/> SIDE
<input type="checkbox"/> GUTTERS	<input type="checkbox"/> FRONT
<input type="checkbox"/> FENCE(S)	<input type="checkbox"/> REAR
<input type="checkbox"/> WALLS	<input type="checkbox"/> PATIO COVER
<input type="checkbox"/> SIDE	<input type="checkbox"/> PLAYHOUSE
<input type="checkbox"/> FRONT	<input type="checkbox"/> SPA AND EQUIPMENT
<input type="checkbox"/> REAR	<input type="checkbox"/> ANTENNA/SATELLITE DISH
<input type="checkbox"/> RETAINING	
<input type="checkbox"/> EXTENSION	
<input type="checkbox"/> RELOCATION	
<input type="checkbox"/> OTHER: _____	

Please ensure that the following details are shown on your plans and the following documents attached:

<input type="checkbox"/> NAMES OF PLANTS	<input type="checkbox"/> THREE (3) SETS OF PLANS OR DRAWINGS
<input type="checkbox"/> TYPE OF MATERIALS USED	<input type="checkbox"/> NEIGHBOR SIGNATURES
<input type="checkbox"/> TYPE OF WOOD SURFACES	
<input type="checkbox"/> COLOR SCHEME	

NOTE: Plans that are approved are not to be considered authorization to change the drainage plan as installed by the developer and approved by the City of Pomona. The review is intended to consider aesthetic appearance of the drains, pipes and coring and other applicable aspects of drainage. Plans are not reviewed from the standpoint of structural safety or conformance with building or other codes.

Owner may also need to acquire approval from the City of Pomona for permission to encroach within public easements or right-of-way. Building permits may need to be obtained from the City of Pomona for such improvements as patio covers, gazebos, spas, pools etc.

NEIGHBOR NOTIFICATION

It is the intent of the Architectural Review Committee to consult neighbors on any improvements which may impact their use and enjoyment of their property. Neighbor approval or disapproval of a particular improvement shall only be advisory and shall not be binding in any way on the Architectural Review Committee's decision.

1. Definitions:

Facing Neighbor: Means the three (3) homes directly across the way.

Adjacent Neighbor: Means all homes with adjoining property lines to the Lot in question.

Impacted Neighbor: Means all homes in the immediate surrounding area which would be affected by the construction of any improvement.

2. Improvements Requiring Notification:

Any exterior improvements that may impact the neighbors in the Community.

3. Statement:

The Facing, Adjacent and Impacted Neighbor Statement must be provided to the Architectural Committee to verify the neighbors have been notified about the proposed improvements.

COUNTRY PARK VILLAS HOMEOWNERS ASSOCIATION
FACING, ADJACENT AND IMPACTED NEIGHBOR STATEMENT

The attached plans were made available to the following neighbors for review.

FACING NEIGHBOR:

Name	Address	Signature
------	---------	-----------

FACING NEIGHBOR:

Name	Address	Signature
------	---------	-----------

FACING NEIGHBOR:

Name	Address	Signature
------	---------	-----------

ADJACENT NEIGHBOR:

Name	Address	Signature
------	---------	-----------

ADJACENT NEIGHBOR:

Name	Address	Signature
------	---------	-----------

IMPACTED NEIGHBOR:

Name	Address	Signature
------	---------	-----------

IMPACTED NEIGHBOR:

Name	Address	Signature
------	---------	-----------

The neighbors have seen the plans I am submitting for Architectural Review Committee approval (see above verification). I understand neighbor objections do not in themselves cause denial. However, the Architectural Review Committee will contact the neighbors to determine their objections and their appropriateness, if necessary.

SUBMITTED BY:

NAME: _____ **DATE:** _____

ADDRESS: _____

DO NOT WRITE BELOW THIS LINE - FOR ARCHITECTURAL COMMITTEE ONLY

DATE RECEIVED:

1. Received by _____: Date: _____
2. Received by the Architectural Committee: Date: _____

Committee Comments: _____

() Approval:

- () Approval:
- () Conditions of Approval:
- () Disapproval for the following reasons:
- () Returned to Owner/Applicant for the following items:

Date: _____

Approved by: _____

Approved by: _____

TRANSMITTED TO OWNER: Date: **Via:**

Notes to Action Property Management:

Revision: 12/22/10